9739846159 PHARMA PATENT ATTYS PAGE 01 08/30/2006 13:33 PART B - FEE(S) TRANSMITTAL PE. Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents AUG 3 O POOR P.O. Box 1450 Alexandria, Virginia 22313 1450 or Fax (571)-273-2885 INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Putent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless of sected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block | for any change of address) 22925 07/31/2006 7590 Certificate of Mailing or Transmission I hereby certify that this Foo(s) Transmittal is being deposited with the United States Postul Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUF FEE address above, or being facsimile transmitted to the USPIO (571) 273-2885, on the date indicated below. PHARMACEUTICAL PATENT ATTORNEYS, LLC 55 MADISON AVENUE 4TH FLOOR MORRISTOWN, NJ 07960-7397 (Depositor's name) (Date) PRING DATE ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO FIRST NAMED INVENTOR 10/501,743 06/30/2004 Rohit Ravikant Soni SUN PRARMA INVENTION: PROCESS THE PREPARATION OF NOVEL TRANS-3-FTHYL-2,5-DIHYDRO-4-METHYL-N-[2-[4-[[[[(4-METHYL CYCLOHEXYL) AMINO]CARBONYL] AMINO]SIJLFONYL] PHENYL]ETHYL]-2-OXO-1H-PYRROLE-1-CARBOXAMIDE APPLN, TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL PEE(S) DUE DATE DUE \$300 \$0 10/31/2006 \$1400 \$1700 nonprovisional NO EXAMINER ART UNIT CLASS-SUBCLASS CHUNG, SUSANNAH LEE 1626 514-423000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). For printing on the patent from page, list (1) the names of up to 3 registered patent attorneys Patron Pharmacoutical ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Attorneys, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. > "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47: Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an usaignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE; (CITY and STATE OR COUNTRY) 1-1umbai, INDIA Sun Pharmaceutical

4a. The following fee(s) are submitted: Issue Fee

Dublication Fee (No small entity discount permitted)

Advance Order - # of Copies

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Pee and Publication Pee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Typed or printed name ___ J Mark Pohl

Registration No. 353ZS

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwark Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

08/39/2006 CH6UYEN1 00000958 19501743